PART B - FEE(S) TRANSMITTAL

	APR 2 0	2006		or <u>F</u>	ax (571) 273-2885	ginia 22313-1450	
INSTRU appropri indicate mainten	UCNONS: This formate. The further corner of unless the precise of the corner of the co	m should be used for transfers of the February directed otherwise	mitting the ISSU atent, advance ordin Block 1, by (a)	E FEE and F lers and notif specifying a	CUBLICATION FEE (if requirements of maintenance fees new correspondence address	uired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a sepa	hould be completed where correspondence address as trate "FEE ADDRESS" for
CURR	ENT CORRESPONDENCE 27162 75	E ADDRESS (Note: Use Block I for a	ny change of address)		Note: A certificate of Fee(s) Transmittal. Transmittal. Transmittal.	f mailing can only be used for his certificate cannot be used hal paper, such as an assignment te of mailing or transmission.	or domestic mailings of the
ST 5 E	EWART & OLS BECKER FARM	ROAD	AN, CECCH	II,	Consider the control of the control	ertificate of Mailing or Trans this Fee(s) Transmittal is bein with sufficient postage for fir ail Stop ISSUE FEE address PTO (571) 273-2885, on the c	smission g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.
2006 (OSELAND NUO	17 09845280			Francis	C. Hand	(Depositor's name)
2501 1504 8001	700.00 OP 300.00 OP 30.00 OP			Jenns	- 17-06	(Signature) (Date)	
APF	PLICATION NO.	FILING DATE	FIRST NAME		INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	APPLN. TYPE	SMALL ENTITY	ISSUE FI		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
n	onprovisional	NO	\$1 40 6	700	\$300	\$1700 	04/19/2006
EXAMINER		INER	ART UNIT		CLASS-SUBCLASS]	
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. [Francis C. Hand Carella, Byrne, Bain 3			
		RESIDENCE DATA TO B an assignee is identified be 37 CFR 3.11. Completion of				gnee is identified below, the	document has been filed for
(A) ì	NAME OF ASSIGNI	E E	(B) RESIDENC	E: (CITY and STATE OR CO	OUNTRY)	
	Frankly G					Gate, Florida	·
	following fee(s) are			. Payment of		Corporation or other private gr	oup entity Government
∑ is	ssue Fee			A check	n the amount of the fee(s) is		
					ayment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to sit Account Number $0.3-0.6.78$ (enclose an extra copy of this form).		
				Deposit Acc	ount Number $03 - 06.78$	(enclose an extra	copy of this form).
X a	. Applicant claims SI	(from status indicated above MALL ENTITY status. See is requested to apply the Issuer	37 CFR 1.27.			ALL ENTITY status. See 37 C	
NOTE:	The Issue Fee and Pras shown by the reco	ublication Fee (if required) words of the Uprited States Pate	vill not be accepted int and Trademark	from anyone Office.		sly paid issue fee to the applic gistered attorney or agent; or	
interest	norized Signature	Tymes !	Liffed	<i></i>	Date	4-17-06	2
	Typed or printed name Francis C. Hand This collection of information is required by 37 CFR 1.311. The information an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1 submitting the completed application form to the USPTO. Time will vary this form and/or suggestions for reducing this burden, should be sent to the Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR C Alexandria, Virginia 22313-1450.				Registratio	on No. 22,28	0
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